APR 1 2 200/

PETITIO	ON FOR EXTENSION OF	TIME UNDER 37 CFR 1.136(a)	Docket Number: 045278-002000					
CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]		In re Application of: Henning WALCZAK						
		Application Number: 10/551,004	Filed: March 26, 2004					
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USBTO at the control of the		For: IMPROVED FC FUSION PROTEINS						
		Group Art Unit: 1644	Confirmation No. 1454					
Signature:	dul that							
Name: Linda	Clinkenbeard	·						
	request under the provisions on the above identified application	of 37 CFR 1.136(a) to extend the period on.	d for filing a					
	ested extension and appropria me period desired):	te entity fee are as follows						
	One month (37 CFR 1.17	7(a)(1)) - (\$60/\$120)	\$					
	☐ Two months (37 CFR 1.1		\$ · · ·					
	☐ Three months (37 CFR 1	* * * * * * * * * * * * * * * * * * * *	\$					
	Four months (37 CFR 1.		\$ 795.00					
		17(a)(5)) - (\$1080/\$2160)	S					
	· · · · · · · · · · · · · · · · · · ·							
□ A ch	A check to cover the fee is enclosed.							
☐ Payr	nent by credit card. Form PT	O-2038 is attached.						
	Commissioner has already be ication to a Deposit Account.	en authorized to charge fees in this						
or cr	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-3557</u> . I have enclosed a duplicate copy of this sheet.							
		is form may become public. Credit of credit card information and authorize						
I am the	☐ applicant/inventor							
		entire interest. See 37 CFR 3.71. CFR 3.73(b) is enclosed. (Form PTO/S	SD/04)					
	attorney or agent of reco		SB/90).					
	attorney, or agent under 3	· · · · · · · · · · · · · · · · · · ·						
	Registration number	if acting under 37 CFR 1.34(a)						
			110007					
	Signature	·	Date					
	/ 7	42 241	(415) 094 9200					
-	Birgit Millauer, Reg. No.		(415) 984-8200 Telephone Number					

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

credit any overpayment under 37 C.F.R. §1.16-1.17, to Deposit Account No. 50-3557. A copy of this paper is enclosed.

4-9-07

Date

NIXON PEABODY LLP Suite 900, 401 9th Street, N.W. Washington, D.C. 20004-2128 (415) 984-8200 Respectfully submitted,

Birgit Millauer

Registration No. 43,341

The Man	Complete if Known							
FEE TRANSMITTAL	Application N	Application Number 10/551,004						
61 151	Filing Date		March 26, 2004					
(C) (N) F(1) R FY 2007	First Named Inventor		Henning WALCZAK					
Patent fees are subject to annual revision.	Examiner Name		Unassigned					
Applicant claims mall entity status. See 37 CFR 1.27	Art Unit							
	Attorney Doc	ket No	045278-00	2000				
METHOD OF PAYMENT (s) 975.00 METHOD OF PAYMENT (check all that apply)	711101110, 200		L	CULATION (continued)				
	3 ADDITIO	NAL FEE		COLATION (continued)				
Check Credit Card Money Other None 3. ADDITIONAL FEES								
Deposit Account:	Large Entity	Small Entit	У					
Deposit	Fee Fee	Fee Fe		Fee Description				
Account 50-3557 Number	Code (\$) 1051 130	Code (\$) 2051		- late filing fee or oath	55.00			
	1052 50	1	•	- late provisional filing fee or cover sheet	33.00			
Deposit	1053 130		J	sh specification				
Account Nixon Peabody LLP	1812 2,520	1812 2,5	-	a request for ex parte reexamination				
Name	1804 920*	1804 92	•	g publication of SIR prior to Examiner action	<u> </u>			
The Commissioner is authorized to: (check all that apply)	1805 1,840*	1805 1,84	•	•				
Charge fee(s) indicated below Credit any overpayments	· · · · · ·	1	•	g publication of SIR after Examiner action				
Charge any additional fee(s)	1251 120	2251	60 Extension	for reply within first month				
Charge fee(s) indicated below, except for the filing fee	1252 450	2252 2	25 Extension	for reply within second month				
to the above-identified deposit account.	1253 1,020	2253 5	10 Extension	for reply within third month				
FEE CALCULATION	1254 1,590	2254 7	95 Extension	for reply within fourth month	795.00			
1. BASIC FILING FEE	1255 2,160	2255 1,0	80 Extension	for reply within fifth month				
Large Entity Small Entity	1401 500	2401 2	50 Notice of	Appeal				
Fee Fee Fee Fee Description Code (S) Code (S) Fee Paid	1402 500	2402 2	50 Filing a br	ief in support of an appeal				
· Cour (3)	1403 1,000	2403 5	00 Request fo	or oral hearing				
· 1001 300 2001 150 Utility filing fee	1451 1,510	1451 1,5	10 Petition to	institute a public use proceeding				
1002 200 2002 100 Design filing fee	1452 500	2452 2	50 Petition to	revive - unavoidable				
, , , , , , , , , , , , , , , , , , ,	1453 1,500	2453 7	50 Petition to	revive - unintentional	· 			
1003 200 2003 100 Plant filing fee	1501 1,400	1		ue fee (or reissue)				
1004 300 2004 150 Reissue filing fee	1502 800		00 Design iss					
1005 200 2005 100 Provisional filing fee	1503 1,100	i	50 Plant issue					
SUBTOTAL (1) (5) 0.00	1460 130			o the Commissioner				
SUBIOTAL (1) (\$) 0.00								
	1807 50	1	-	g fee under 37 CFR 1.17(q)				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1806 180			on of Information Disclosure Stmt				
Fee from Extra Claims below Fee Paid	8021 40	8021		each patent assignment per property (times properties)				
Total Claims -20** = X = 0	1809 790	2809 3		bmission after final rejection				
Independent -3** = X = 0	1810 790	2810 3	(37 CFR I 95 For each a	.129(a)) dditional invention to be examined				
Claims	1010 770	2510	(37 CFR I					
Multiple Dependent $X = 0$	1801 790	2801 3	95 Request fo	or Continued Examination (RCE)				
Large Entity Small Entity	1802 900	1802 9	00 Request fo	or expedited examination of a design				
Large Entity Small Entity Fee Fee Fee Fee <u>Fee Description</u>	1802 900	1802 9	application					
Code (S) Code (S)	Other fee (specify) Excess pages of specification 125.00							
1202 50 2202 25 Claims in excess of 20								
1201 200 2201 100 Independent claims in excess of 3	l							
1203 360 2203 180 Multiple dependent claim, if not paid	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 975.00							
200 2204 100 ** Paigus independent daims over								
original patent	CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]							
1205 50 2205 25 ** Reissue claims in excess of 20 and over	d over I hereby certify that this correspondence, on the date shown below, is being							
original patent SUBTOTAL (2) (\$) 0.00				Service with sufficient postage as first c	lass			
	mail in an e	mail in an envelope addressed to MAIL STOP Missing Parts, Commissioner of						
**or number previously paid, if greater; For Reissues, see above Patents, Box 1450, Alexandria, VA 22313, 1450.								
CH. 114.								
April 9, 2007 Date Signature								
Linda Clinkenbeard								
Typed or printed name								
SUBMITTED BY				Complete (if applicable)				
Name (Print/Type) Birgit Millauer	Registration N		43,341	Telephone 415 984-8	3200			
(Autoriey/Agent)					007			
Signature Date April 9, 2007								